

Complete Summary

TITLE

Preventive services in adults: percentage of patients with all priority preventive services up-to-date according to the guideline delivery schedule.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Preventive services in adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2005 Oct. 81 p. [145 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of adult patients with all priority preventive services up-to-date according to the guideline delivery schedule.*

*Refer to the related National Guideline Clearinghouse (NGC) summary of the Institute for Clinical Systems Improvement (ICSI) guideline [Preventive Services in Adults](#) for details.

RATIONALE

The priority aim addressed by this measure is to increase the percentage of patients with all priority preventive services up-to-date.

PRIMARY CLINICAL COMPONENT

Priority preventive services

DENOMINATOR DESCRIPTION

Total number of patients who present in the clinic for a non-emergent primary care visit

Note: Some medical groups may choose to calculate a measurement on the entire clinic population.

NUMERATOR DESCRIPTION

Number of patients up-to-date on all priority preventive services (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Preventive services in adults.](#)

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

TARGET POPULATION AGE

Age greater than or equal to 19 years

Note: Medical groups may choose to specify age parameters to simplify measurement.

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Total number of patients who present in the clinic for a non-emergent primary care visit. Medical groups may choose to specify age parameters to simplify measurement.

Patients who have had an office visit of any kind within the preceding month can be randomly sampled to produce a sample of at least 20 records for review. Selected records are audited using the checklist tool (found in the original measure documentation) to determine a patient's status on each of the preventive services listed.

Data can be collected monthly.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Total number of patients who present in the clinic for a non-emergent primary care visit

Note: Some medical groups may choose to calculate a measurement on the entire clinic population.

Exclusions

Unspecified

DENOMINATOR (INDEX) EVENT

Encounter

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of patients up-to-date on all priority preventive services*

*A patient must be up-to-date on all applicable priority preventive services** to meet the criteria. For a service to be counted as provided, it should be documented with a date of service. If the medical

record documents that the service was offered to the patient and the patient declined the test or procedure, it should be counted as a "yes" to the criteria.

**Refer to the related National Guideline Clearinghouse (NGC) summary of the Institute for Clinical Systems Improvement (ICSI) guideline [Preventive Services in Adults](#) for details.

Exclusions
Unspecified

NUMERATOR TIME WINDOW

Encounter or point in time

DATA SOURCE

Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Percentage of patients with all priority preventive services up-to-date according to the guideline delivery schedule.

MEASURE COLLECTION

[Preventive Services in Adults Measures](#)

DEVELOPER

Institute for Clinical Systems Improvement

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Sep

REVISION DATE

2005 Oct

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Institute for Clinical Systems Improvement (ICSI). Preventive services for adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2004 Sep. 51 p.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Preventive services in adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2005 Oct. 81 p. [145 references]

MEASURE AVAILABILITY

The individual measure, "Percentage of patients with all priority preventive services up-to-date according to the guideline delivery schedule," is published in "Health Care Guideline: Preventive Services in Adults." This document is available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#).

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

NQMC STATUS

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